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ABSTRACT

Three outside consultants were asked to evaluate the validity of current special education placement procedures and policies in the Montgomery County, Maryland Public Schools (MCPS) to determine their effect on minority students. Procedures for obtaining information included mailing questionnaires to 396 families and observing in-service staffing conferences and area screening committee meetings. Major findings were that there was no evidence of racial or socio-economic class discrimination in MCPS written policy and placement procedures or in the MCPS 5-year Plan for Special Educational Services; that staff members needed to develop greater sensitivity to minority issues during the initial screening and classification process; that improvement was needed in the quality of placement conference data; that testing policies and the use of test results needed to be clarified; that the majority of parents surveyed were satisfied with the placement procedures and their children's program; and that MCPS personnel had a low tolerance for students who exhibited behavior or background different from established community norms. Evidence supported recommendations in 11 areas: communication, school-by-school needs assessment, pre-referral procedures, identification and classification procedures, staff development, testing and policy procedures, school medical advisors (SMA), parent concerns, programs, human relations, and public relations; and included that there be a review and classification of the role of SMAs in the placement process. (Provided are appendixes such as the MCPS questionnaire.) (SB)

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A STUDY OF THE SPECIAL EDUCATION PLACEMENT PROCEDURES IN MONTGOMERY COUNTY, MARYLAND PUBLIC SCHOOLS

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FOREWORD

The need for this study grew primarily out of the extensive work done by the Citizens Advisory Committee on Minority Relations. Their recommendation was that a special outside evaluation be made of procedures for placing students in special education classes to determine if MCPS makes accurate assessments of students' needs and provides good placements for them. Our special emphasis was to determine how existing procedures affect minority students.

A committee of consultants was selected with the assistance of the Chairman of the Citizens Advisory Committee, the Subcommittee on Special Education and MCPS staff. The Citizens and staff charge to the consultants was to "help MCPS improve its services to handicapped children." We arrived at a mutual understanding of task, outlined a step by step procedure and were assured of the complete cooperation of the system in carrying out the primary task.

We had originally proposed a study of about ten weeks in duration, however it was necessary to extend the time in order to do a more careful job of analysis of the large amount of data collected from staff, parents and community groups and then to arrive at a set of realistic recommendations.

.....

The consultants are grateful to those persons and departments within MCPS who so willingly assisted with the conduct of the study. Their interest, support and openess of dialogue is acknowledged and deeply appreciated.

A special acknowledgement must go to our two research assistants for the very thorough and professional work during the course of this study.

Finally, we applaud the Montgomery County Board of Education for its interest and commitment to excellence on behalf of all its children.

John L. Johnson, Ed.D.
Consultant Committee Chairman

Date: July 14, 1975

A STUDY OF THE SPECIAL EDUCATION PLACEMENT

PROCEDURES IN MONTGOMERY COUNTY, MARYLAND

THE PROBLEM

A. Primary Task

The primary task for the consultants was to conduct a validity study of the placement procedures and policies currently in effect in the Montgomery County, Maryland Public Schools (MCPS). The programs and activities of the Department of Supplementary Education and Services (special education and pupil appraisal, included) and the total school system were the work boundaries. Special scrutiny was to be given to determining how the existing identification and placement procedures were being utilized in relation to placement of MCPS minority students.

The three (3) consultants, augmented by two staff, were to carry out this task, including the preparation of recommendations for revision of the existing procedures, policies, and process, as determined from our study.

The particular "validity concern" in this study was to be able to collect data on both the content (the placement policy statements themselves) and the process (what is done with the placement policy statements) and to make professional recommendations to MCPS, based upon our findings.

B. Preliminary Questions to be Addressed

1. What are the present classification procedures for ascertaining a student's need for special education and/or services?
2. How do students obtain "disciplinary," "disability," or "handicap" labels? How valid are the labels and diagnoses now being utilized?
3. Are there certain groups of students who find their way into special education in greater proportion to their school populations? Why?

4. Are there certain groups of students who are missed and should be receiving supplementary services?
5. What is the present supplemental services and special education census by program type, age, race and disability label?
6. What are the attitudes of MCPS personnel regarding (a) minority students, and (b) special education?
7. Once in special education how do students return to the mainstream?

METHODS OF STUDY

Three basic techniques were utilized in this study:

1. Interview and Questionnaire
2. Observation
3. Review of Available Documents
   a) Organizational Structure
   b) Policy and Procedures Statements
   c) Existing data

Formal interviews were held with the following persons:

1. Superintendent, MCPS
2. Director of Supplementary Education and Services
3. Director of Pupil Services
4. Director of Special Education
5. Supervisor, Pupil Placement Section, Dept. of Supplementary Education and Services
6. Director of Psychological Services
7. Area Assistant Superintendents (I thru VI)
8. Area Supervisors of Pupil Services
9. Area Supervisors of Supplementary Education
10. Director of Human Relations

A questionnaire was designed to sample consumer (parent) views of the placement process and was mailed to 396 families. Additionally discussions were held with representatives of community consumer organizations (handicapping conditions and minority concerns). In-School staffing conferences and Area Screening Committee meetings were attended and observed in each of the six areas. Documents reviewed included, but were not limited to:

1. Department of Supplementary Education and Services document, "Placement Procedures," Sept. 1, 1974.
2. Report of the Citizens Advisory Committee on Minority Relations.
3. Superintendents Memorandum: Placement and Hearing Procedures for Special Education Programs, Dec. 12, 1974.
4. Progress Report on the Division of Special Education - 1973-74, Nov. 13, 1974.
5. Evaluation of Testing, Assessment and Placement of Children in EMR classes 1974-75.
6. Forms of referral within the placement process.
7. The Continuum Concept of Education : Seven Levels of Service.
8. Catalog of Human Relations Courses.
9. Action Steps in Minority Relations, Dec. 1971.
10. Voelker Report: Implementation of Recommendations in a Study of the Special Education Program, MCPS.
11. Dept. of Records and Reports: Minority Group Membership of Pupils as of 9/30/74, Oct. 1974.
12. Comprehensive five-year plan for Special Educational Services April 1, 1975.
13. Staff Reaction to Comprehensive five-year plan for Special Educational Services, March 17, 1975.

14. Statistical Review of Special Education Placements for School Year 1974-75.

15. Special Education By-Law. Approved by the Maryland State Board of Education, October 30, 1974.

16. Staff Memoranda on testing of minority children, 1972.

MAJOR FINDINGS

I. Review of Present Classification and Placement Policy

In reviewing the MCPS Department of Supplementary Educational Services written policy on placement procedures (dated Sept. 1, 1974), and the MCPS Comprehensive Five-Year Plan for Special Educational Services, the consultants find no evidence of racial or socio-economic class discrimination in these documents.

While the present Montgomery County Public School Classification and Placement Procedures are reasonable and do no discriminate for or against any group of people, a "communication problem" exists between the central administrative staff and the area staff on implementation of the policies in select areas. To a large extent, this type of problem is inevitable whenever a large, complex public system has become decentralized. The central staff retains the authority and responsibility for policy while program accountability is assigned directly to the Area Assistant Superintendent and his/her staff. Under this organizational system, the Supervisor of Supplementary Education and the Supervisor of Pupil Services are directly responsibile to the Area Assistant Superintendent and not to the central administrative staff. Consequently we found some staff in select areas to be confused or just unknowledgeable about the current Classification and Placement Procedures. For example, there was considerable discussion regarding whether the policy went into effect July 1, 1975, or was already operative. In addition several of

parent advisory groups reported to the committee that they frequently get different "messages" about appeal procedures when they talk to Central Administrative Staff, Area Assistant Superintendents, and Supervisors of Supplementary Education. Our concern was to identify this information gap between central administration and area staff. We note the existence of a difficult task which cannot be accomplished by issuing another brochure or writing another memo.

The MCPS Comprehensive Five-Year Plan for Special Education Services was published during the course of the consultants study. It seemingly fulfills the requirement stated by Public Law 649 and proposes a quality program for handicapped pupils. The plan clearly re-affirms the right of all handicapped pupils to a free and appropriate educational program. It stresses the importance of establishing unbiased testing, assessment and identification procedures. The programs are organized on the Maryland continuum model of seven levels of service to handicapped pupils, guaranteeing that handicapped pupils will be appropriately placed in all types of educational programs and facilities. In addition, the document spells out the importance of due process, child advocacy and parental appeal processes. It emphasizes the need for ongoing review and evaluation including advisory parent groups to the public schools. Finally, the plan recognizes the need for continuing financial support if these goals are to be achieved.

The goals of special education and placement procedures as written in the Comprehensive Five-Year Plan for Special Educational Services, in the view of the consultants, are fair, unbiased, and articulate. Montgomery County should be congratulated for proposing such a strong, thorough, and pervasive set of goals, standards and procedures for special education.

II. Validity of the Screening, Assessment and Placement Conference Procedures

A. Discussions of Interviews with Key Personnel

1. Central Office Staff

The consultants found the initial round of interviews with Central office staff to be very helpful in attempting to delineate the problem and to set up a method for accomplishing the primary task. The Central office staff initially pinpointed a series of critical concerns ranging from whether or not correct assessment techniques were being utilized, to a sincere desire to know how cultural, socioeconomic and racial factors were at work within the present placement procedures.

There does, from the Committee's interview of Central office staff, seem to be a split in opinion among the various sectors who are responsible for elements of the classification and placement procedures. While most personnel appeared to be concerned and dedicated about attempting to clarify and resolve the problem, at hand the Committee reports the following results of its interviews and observations:

(a) The presence of significantly defensive attitudes about the inquiry into the classification and placement process, marked on the one hand by an "everything is allright because we're doing better than we used to" notion, to outright denial that any problem of placement of minority students exists in MCPS.

(b) A tendency to place the problem into a perspective which would show the Areas as needing more supervision and efficiency in administering the present placement policies.

(c) Almost universal agreement within the Central Office that the Area schools were not doing an "adequate job" and that area staff were less tolerant of minority children than they should be.

(d) The presence of the opinion that more minority children are referred to special education than should be, mainly due to lack of appropriate programming within the schools.

(e) The development of a "pressure process" in which special education placement is seen as the way of approaching and alleviating difficult academic problems.

(f) The fact that the referral process was not consistent from area to area, with formal and informal procedures being applied as area needs dictated.

2. Area Administrative Staff

In its interviews with Area Administrative staff the consultants found staff to be cooperative. Most personnel appeared to be concerned and dedicated but very much caught up in the complexity of attempting to administer the present placement policy and to set up and supervise their on-going programs. The results of our interviews with Area staff are as follow:

(a) While all felt that there was a general improvement in special education programs, they were faced with gaps in programs, unequal distribution of resources, and complete lack of services for specific types of children.

There is particular and pervasive concern about the serious gap at the secondary level, the absence of diagnostic-prescriptive resources in some areas, and the lack of basic programs for

emotionally disturbed children.

(b) There was general admission that more minority students are found in classes for the mentally retarded. It was expressed that the problem would be lessened if "more resources" were available.

(c) There was a general insensitivity to and misunderstanding about the legal ramifications and stigma involved in placement of a child in special education. Most staff expressed a sincere desire to "provide for the needs" of the child but were not atuned to the effect of labeling a child "retarded" via the State mandated SSIS reporting procedure.

There was considerable lack of differentiation between the needs of a child who is handicapped versus a child who is simply behind scholastically, or a child who is from a low-income family and/or is economically disadvantaged. Special education seemingly has become confused with "supplemental " "remedial" and "compensatory," and "handicap" has become confused with "impairment" and "disability" in the professional thinking of area staff.

(d) There appeared to be genuine concern about the fairness of the diagnostic/assessment process, however, there was observed variance in attitudes about what constitutes a "fair" process. The issue of tests and testing was almost always spontaneously introduced and there was considerable discussion as to whether or not tests are helpful in the placement process.

(e) There was general agreement that the placement policies and procedures were followed in most instances and that the major problem was in finding adequate placement (slots) for a child once the procedures were carried out.

(f) There was general agreement that all staff were not as sensitive to minority issues, as they should be, particularly in the initial screening and classification process.

(g) A subtle, but generalized, concern was revealed to the consultants throughout the interviews with Area Administrative Staff. It is the existence of a set of system wide norms and expectations for academic achievement and behavior. Our observations revealed, (and many staff directly expressed this same view) that there are sig..ificant and systematic external pressures based upon majority expectations about conduct and learning style. While they may vary from area to area in specific forms they are present within the "county community," and staff, particularly teachers, experience considerable pressure to get children to perform academically and confom behaviorally or to "get them out." For instance certain norms about noise level, learning patterns, and communication styles seemingly have become imposed upon all children, and when any variance occurs special placement (removal from regular education) is considered. The consultants also observed that there are very high achievement norms (in some schools average achievement scores are one year above grade placement) and that

throughout MCPS these norms have become idealized to the point that when in reality students who do not meet these idealized expectations they are more often referred to special education, particularly when differences in socialization style and/or socio-economic factors are manifest.

We feel that this is perhaps the source of the "placement pressure" within the system and that minority children become one of the victims, as do economically disadvantaged children. It is our view that when these variances from the idealized norm (operating well below the conscious awareness of the staff) occur, the pressure to find a placement begins to build and special education is considered as the suitable alternative when compensatory education and remedial education might well serve the needs of the child and MCPS more appropriately.

B. Observations of Conferences and Quality of Conference Data

A member of the Evaluation Committee observed Area and In-School Screening in each of the six Areas, and filled out a standard observational check list, and questioned staff about the types of services offered to children prior to the meeting of the Screening Committee.

Our general conclusion is that the policy regarding Area Screenings is being followed and across areas there was a polite professional atmosphere in the meetings. In almost all screenings the personnel required to be present were there and actively participating with the notable exception of the School Medical Advisors (SMA). The consultants'

conclusions are as follows:

1. There appears to be an average time of about twenty minutes given to discussion and decision making during an Area Screening meeting. For complicated cases this is hardly enough time and in a long afternoon, staff are literally drained by the necessity of coming to a realistic decision on case after case.

2. Data presented to describe student behavior usually included a large amount of opinions and judgements, some informal and dated observations, very little formal observations, some information from parent sources, and very scant information from interviews with the student, when such were appropriate. Where purported student behavior was described, i.e. "teachers couldn't handle him," "hyperactive," there was little concrete evidence given, nor asked for, in support of such descriptions. Testing results were presented, and once introduced into the meetings "IQ" became a major emphasis and was repeatedly brought up. In general, the quality of data presented left much to be desired and quite often cases were not well prepared thus making an appropriate decision quite difficult. Psychological reports were in many instances three years old or older.

3. There was a tendency throughout the meetings, in all but one Area, to locate "the problem" solely in the student and his/her home and family life. This perspective was especially noticeable, and staff were very quick to point out difficulties experienced in contacting parents, and obtaining cooperation on the problem areas of the student. There was little time for discussion of student strengths, methods which could be utilized

to address the problem areas, and that referrals could in some instances have come about because of teacher inadequacies.

4. There were various methods of coming to a decision about placement, particularly when the case was complicated. Informal consensus was the predominent method; however there was evidence of at least two other decision making strategies. These were in cases where there literally was no appropriate placement for the child and the Supervisor of Supplementary Education had no other choice but to "continue to work on it" and in cases where the staff member chairing the meetings, made decisions during the meeting which were joined in by the rest of the committee by their "not offering any objections."

5. In our observation of placement reviews, screenings and staffings (level 1-7), the committee noted that cases of minority pupils were reviewed with greater intensity and care. There was some feeling that the presence of members of the consultant team in the screenings may have influenced case selection and staff response.

Of striking significance was the almost universal absence of the School Medical Advisors (SMA) from In-School staffings and meager participation in the Area Screening Committee meetings. Such absences were even more significant when it became clear how much weight rested in the medical information, and that in the present system the SMA evaluation is one of the most important evaluations in determining the nature of placement for children. In fact placement itself is in many instances dependent upon the recommendation and signature of the SMA as certification.

Nurses were, in some cases, the only representative of the medical profession present. She in turn would take the necessary records and

papers back to medical headquarters for the physicians signature. In many instances this represented little more than the process of rubber stamping.

C. Census

A census of children placed in supplementary educational (special education programs) was attempted from records maintained at the central offices in Rockville. The data generally showed that there were disproportionate numbers of minority students in special education programs. However, extreme caution should be exercised in drawing definite conclusions from this census, for the following reasons:

1. Data at the central office was not up to date and complete as reports from the field had not been submitted as requested.

2. There was variance from Area to Area as to whether "Diagnostic/Prescriptive" programs were considered "special education." Compounding this finding is the fact that positions allocated for "Disadvantaged" were sometimes converted into "Diagnostic/Prescriptive" positions.

3. The nature of certain programs, such as Diagnostic/prescriptive and resource room, was fluid in census on a day to day basis, so that it was difficult to determine an exact count. There was also a lack of clarity about whether responsibility for assignment of children to these programs rested in the school where they were housed or with the Area Assistant Superintendent. There is some data (from field interviews) to show that children can be assigned on a day to day basis, without proper staffing as the policy requires.

D. Special Review of Testing

The consultants requested that a special review be conducted of the testing and case records, of a selected group of minority students

who had been placed in special education during 1974-75. This review was conducted by the Supervisor of the MCPS Psychological Services Section. The Committee, on its own, then reviewed and verified the materials and results.

The Committee found that the materials were objectively reviewed and that the reviews are of very high professional competence. Figure one (1) shows the results of the review of each of the thirteen cases, on the basis of whether or not there was sufficient information present to arrive at an adequate diagnosis and in terms of suitability of placement

Figure #1

Evaluation of Minority Students Placed in Special Education 1974-75 (EMR Classes)

Student	Diagnosis	Placement
1	Incomplete	Inappropriate
2	Questionable	Inappropriate
3	Incomplete	Inappropriate
4	Incomplete	Questionable
5	Incomplete	Inappropriate
6	Inaccurate	Inappropriate
7	Incomplete	Adequate
8	Incomplete	Questionable
9	Incomplete	Inappropriate
10	Incomplete	Questionable
11	Incomplete	Inappropriate
12	Incomplete	Inappropriate
13	Incomplete	Questionable

Diagnosis		Placement	
Incomplete	- 11	Inappropriate	- 8
Questionable	- 1	Questionable	- 4
Inaccurate	- 1	Adequate	- 1
(N = 13)		(N = 13)	

Of the thirteen cases whose records were reviewed and verified by the consultants there appears to be a very large number who are incompletely diagnosed and inappropriately placed. Our review and discussion of the data revealed the following:

1. Many documents did not have dates or names of persons making reports.
2. Input from supervisors was meager.
3. The approval process for placement seems to be based exclusively on available information rather than the full range of information required to make an important decision.
4. When there was considerable information available--it was not pulled together to sort out contradictions, etc. and to answer the questions raised about conflicting bits of information.
5. Knowledge of the preschool/early childhood student appeared to be exceptionally weak (age range 6-8), especially as it relates to developmental psychology and early childhood education. The concept of developmental tasks appropriate for age level along with developmental-maturational lag was consistently ignored in the reports.
6. Mental retardation as a developmental phenomenon was not diagnosed on the basis of any formal criteria. It appears that the concept of MR as a unitary factor with 1:1 relationship to numerical scores on I.Q. is common practice.
7. Recommendation to special education program for EMR (mild) appeared to be based on the non-availability of a more suitable program for children with serious developmental deficits or language disorders.

In addition to the above, the consultants note that there appeared to be no written policy and implementation guidelines on

testing. Our interviews and observations revealed that there was much individual discretion on the part of school psychologists regarding types of tests to be administered, that various "screening batteries" and "informal" assessments were being utilized all under the guise of professional independence or more specifically that "each case required something different." We find this situation to be unsatisfactory, particularly when there is a definite direction of effects toward I.Q. and use of psychological test results rather than toward understanding how to match learning potential and teaching strategies. The presence of a written policy with sub-section on testing of minorities is essential to good practice.

Another distressing finding has to do with the total lack of supervision of the testing being carried out thus leaving psychologists without a source of professional scrutiny and accountability for their work. Supervision of each case was minimal and the consultants were not able to identify why this standard procedure was not operational in MCPS.

Finally, our observations and interviews revealed a serious qualification problem. It is our impression that many psychologists need additional training in order to more accurately assess "mental retardation," "emotional handicap," "language disability" and "learning disability," in both black and white children. The mere reporting of I.Q. and behavior observed and teacher opinions does not, in our opinion, constitute an adquate diagnosis and can be a most serious violation of professional standards for classifying a child as disabled and in need of special education.

III. Parent Attitude Survey

According to Placement Procedures published by the Department of Supplementary Education and Services, parents are notified and consulted

several times during the process of placement into special education. After the local school holds a Pupil Services Staff Conference, parents are notified and their permission is obtained if testing is necessary. After testing, a second conference is held, including the parents. The results of the testing are presented and recommendations made for a program. If the recommendation is for special class placement, the parents must sign a form granting their permission for such placement.

Since parents are to be directly involved in the placement process and are, indirectly, the consumers of special education services, their reactions, attitudes and perceptions are of value. It is important for parents to feel satisfied with the proposed special education program and to feel that they and their child have been treated with respect and fairness by staff of the school system. Such feelings will directly or indirectly be conveyed to the child and will temper his feelings toward his school experience.

The population for the survey was all parents of children placed in catch-up classes, in special class for the mildly retarded, the emotionally handicapped and the learning disabled, and in secondary classes for mild learning handicaps. The study included only those parents whose children were placed in the fall of 1974. Therefore, parents' perceptions of placement procedures as they are currently being carried out (in the last two years) by MCPS (the school) could be determined.

The parents were sent a 19 question survey. The last question invited parents to add any pertinent comments. Most of the questions had two or more parts. Before the main study was done the questionnaire was approved by MCPS and a pilot study was conducted. Three hundred ninety six questionnaires were sent out for the main study. Two hundred thirty-nine (60%) of the questionnaires returned and were usable.

The following were the seven major questions the consultants attempted to answer in the survey:

1. How much understanding did parents have of (a) the reasons(s) why their child was recommended for special education, and (b) the psychological testing, its results and implications?
2. Were parents surprised (a) when they were told of their child's problem in the regular classroom, (b) when they were told of the results of testing, and (c) when special education was recommended?
3. Were parents in agreement with the school regarding their child's problem(s) and in agreement regarding the diagnosis?
4. Did parents feel that they could trust the school in doing the testing and in placing the child in special education?
5. How much choice did parents feel that they had regarding the testing of their child and the placement of their child in special education?
6. Did parents feel that their child was treated fairly with regard to testing and placement?
7. How satisfied, in general, were parents with the entire placement process and with the child's special education program?

The results of the survey were analyzed with race, school program, geographic area as main variables. In addition, several non-attitudinal questions were reported and presented in this report. Frequencies, means and standard deviations were obtained for each item of the questionnaire. A chi square analysis was done to test the hypotheses that there would be no differences among responses with regard to sex, race, program, and sex and program combined.

Our one concern was whether the survey data represented a biased sample of parents. The analysis of the questionnaire results showed no significant loading in any one program, geographic area, or race. The questionnaire seemed to represent an adequate cross-section of parents, programs, areas and races.

RESULTS OF THE SURVEY

A. Basic Information Regarding Special Education Placement Process

Question One: Who first suggested that your child might be having difficulties in the regular classroom?

Table 1: Initial Referral

	Frequency	Percent
Teacher	110	48
Parents	52	23
Principal	17	7
Other (family doctor, psychiatrist, etc.)	17	7
Counselor	8	4
Combination of the above	25	11
Total	229	100

98% of the parents indicated that the classroom teacher initiated a concern that their child was having difficulties in school. 2% of the parents indicated that they were aware of the difficulties and initiated a meeting with the teacher. Together these two sources (classroom teacher and parents) represent 70% of all responses. This finding reinforces the importance of both classroom teacher and parents being sensitive to the developmental needs of children. It is clear that Montgomery County classroom teachers function as early "suspectitioner". This trend needs to be supported and enhanced as the school system increases its emphasis on early identification and preventive programs.

Question Two: What kind of difficulty was he having?

Table 2: Nature of Difficulty

	Frequency	Percent
School Work	128	55
Behavior	40	17
Other problems (not listed here)	19	8
Getting along with classmates	4	2
Getting along with the teacher	1	0
A combination of the above	43	18
Total	235	100

55% of the parents reported that the initial difficulty their child was having was in the area of learning. 17% reported the difficulty to be in the area of behavior management. 18% indicated that a combination of problems were present. It is interesting to note that only one parent out of 235 indicated the pupil's primary problem as a personality conflict with the teacher.

Since Montgomery County Public School System is noted for its academic strivings, it was not surprising that learning difficulty was the major symptom. It is difficult to know whether the academic pressure originates from school, from home or from both sources.

Question Three: After the testing of your child was completed, how long was it before the school met with you to suggest or recommend a program?

Table 3: Time Discrepancy Between Testing and Parent Conference

	Frequency	Percent
Three weeks or less	72	38
Three weeks to three months	91	47
Three months to nine months	19	10
More than nine months	10	5
Total	192	100

47% of the parents reported a time lapse of 3 weeks to 3 months before they had a conference to discuss the results of the testing. 38% indicated a time lapse of three weeks or less. Together, 85% of the parents reported having a meeting in less than three months after the testing. However, 29 parents or 15% of the parents reported that they did not hear from the school until more than three months had elapsed. Although the majority of responses fell within the acceptable time range, it is a concern of this committee that a significant minority of the parents had to wait quite long before hearing from the school. The reasons for this time delay need to be studied and corrective action taken.

Question 4: After it was decided to place your child in the special education program, how long did it take before he was actually placed there?

Table 4: Time discrepancy Between Placement Decision and Actual Placement

	Frequency	Percent
Less than one week	29	14
One week to one month	60	29
One month to four months	64	31
More than four months	53	26
Total	206	100

74% of the parents reported actual placement in a special education program in less than four months. However, 26% of the parents reported having to wait more than four months. Once again, this time delay is a concern of this committee. Recognizing all the problems involved in placement, it is a questionable practice to tell a parent his child will be placed in a special program and then take over four months to accomplish the actual placement. The reasons for this delay need to be examined and corrective action taken.

Question 5: How long do you feel your child will be in special education?

Table 5: Parents' estimates of duration of special education.

	Frequency	Percent
One semester	22	10
One or two years	98	46
Three to five years	50	23
Indefinitely	45	21
Total	215	100

Only 10% of the parents reported that special education placement would be a brief, temporary experience. At least two years was estimated by 45.6%, while over 44% reported that special education would be a part of their child's life for 3 to 5 years or indefinitely.

This finding is surprising, since many studies report parents are upset by special education and want their child to return to the mainstream as quickly as possible. Perhaps the parents in M.C. have a better understanding of their childrens problems and the time it takes to remediate them. Special educators need to consider this finding since mainstreaming exceptional pupils is an increasingly popular professional goal within the system and may meet strong parental resistance if it means fewer facilities and programs.

B. Analysis of the 7 Placement Questions

Question 6: How much understanding did parents have of the placement process?

Table 6: Parent Understanding

	Frequency	Percent
High degree of understanding	130	60
Average degree of understanding	75	34
Low degree of understanding	14	6
Total	219	100

60% of the parents surveyed indicated that they had a high degree of understanding of the special education placement process. 34% indicated an average degree of understanding. Only 6% reported little understanding of the process.

This result is very reassuring. It appears that the large majority of parents are aware of the procedures involved in placing their children in Special Education.

Question 7: How prepared were parents to receive information given to them by the school system? (i.e., How surprised were they?)

Table 7: Parent Preparation

	Frequency	Percent
High degree of preparation	125	56
Average degree of preparation	81	37
Low degree of preparation	16	7
Total	222	100

56% of the parents reported that they were not surprised by the information given to them by the school system. 37%, however, reported that they were "somewhat surprised" and 7% indicated that they were "very surprised" at what they were told.

Question 8: Were parents in agreement with information given to them by the school system?

Table 8: Parent Agreement

	Frequency	Percent
High level of agreement	102	47
Average level of agreement	111	50
Low level of agreement	7	3
Total	220	100

47% of the parents surveyed reported that they agreed completely with what they were told about their children by the school system. 50% reported that they agreed somewhat with what they were told and only 3% indicated that they disagreed with what they were told.

Question 9: How much trust did parents have in the school system with regard to testing and placement?

Table 9: Parent Trust

	Frequency	Percent
High degree of trust	114	53
Average degree of trust	86	41
Low degree of trust	12	6
Total	212	100

Of the parents surveyed, 53% indicated that they could completely trust the judgement of the school in testing their children and in making an appropriate placement. 41% indicated that they had some doubts. Only 6% of the parents indicated that they could not trust the judgement of the school.

Question 10: How much choice did parents feel that they had in the placement process?

Table 10: Parent Choice

	Frequency	Percent
High degree of choice	83	38
Average degree of choice	102	47
Low degree of choice	31	15
Total	216	100

38% of the parents surveyed reported that they had a high degree of choice in the placement process. 47% indicated an average degree of choice. 15% of the parents reported feeling that they had no choice at all. This latter finding is of major concern to the consultants. The parents are promised input into the decision making process regarding their children's placement in Special Education. Yet a significant minority of parents felt they have little or no voice in this process. This finding needs to be evaluated by the school staff in order to better understand the reasons why some parents report such a low feeling of choice.

Question 11: Did parents feel that their children were treated fairly with regard to testing and placement?

Table 11: Parent Fairness

	Frequency	Percent
High degree of fairness	138	67
Average degree of fairness	65	31
Low degree of fairness	4	2
Total	207	100

Judging by the questionnaire responses, parents seemed to feel that their children were treated fairly with regard to testing and placement. Two-thirds (67%) of the parents indicated that their children were treated with complete fairness. 31% felt that the school was fair in some ways and unfair in others. Only 3% reported that they had been treated unfairly.

Question 12: How satisfied, in general, were parents with the placement process and with the special education program?

Table 12: Parent Satisfaction

	Frequency	Percent
High degree of satisfaction	134	59
Average degree of satisfaction	93	41
Low degree of satisfaction	1	--
Total	228	100

59% of the parents indicated that they were very satisfied with placement procedures and with their children's special education programs. 41% reported that they felt somewhat satisfied. Only one parent out of 228 reported feeling unsatisfied.

This is perhaps one of the most important results of the parent survey. It appears that parents are involved in Special Education. They want more and better programs and in general are satisfied with the programs presently being provided for their children.

Analysis by Geographic Area

With the advent of decentralization and the development of six (6) Areas, the consultants were interested in finding out if there are any differences among the 6 geographic regions with regard to the 7 placement questions. Analysis of the data by Chi Square found No Significant Differences among the 6 Areas, based on parent responses to the questionnaire. This finding is most encouraging, since the consultants felt that real differences in services among the areas do exist, it is significant that parents did not report them.

Analysis by Race

One of the major objectives of this study was to determine if minority parents felt that they were getting fair and equitable treatment for their children. To determine this, the parents responses were analyzed by race. Of the questionnaires analyzed, 62 were from the parents of black children, while 168 were from the parents of white children. Analysis of data by Chi Square found No Significant Differences between the races on any of the 7 questions. While the consultants still feel individual examples of racism exit, there is no collective feeling among reporting black parents that their children are receiving preferential or differential treatment.

Analysis by Program

Another area of concern was to determine if there were any differences among the parent responses according to their childrens' programs: "catch up class," "mildly retarded class," "specific learning disabled class," "emotionally handicapped class," or "mild learning handicap class."

An analysis of the data by Chi Square revealed that parents whose children were assigned to Emotionally Handicapped Classes responded significantly differently from other parents on two variables. These

two variables were Parent Preparation (how surprised the parents were when they received information from the school system) and Parent Trust (how well they could trust the testing results and the placement recommendations). Parents of children in classes for the emotionally handicapped responded more negatively on these two questions than parents whose children were in other programs.

The findings are not surprising since parents of children diagnosed as being emotionally handicapped often have difficulty accepting their child's problem and a special program. These parents need additional support and understanding if their cooperation is to be obtained. We feel, in view of these findings, that pupil personnel workers need to improve the quality and frequency of communication with these parents.

SUMMARY

In summary, the data show that the majority of parents surveyed are very content with the placement procedures and their childrens program in special education. This general finding was also supported when the data were analyzed by the 6 school areas, and race. However, a small but significant group of parents have some serious concerns about the specific procedures and practices such as:

1. Having to wait too long before hearing from the school after their children were tested.
2. Having to wait too long before recommended special education programs were put into effect for their children.
3. 15% of the parents surveyed indicated they felt they had an insignificant role in their children's placement in special education.
4. Parents whose children are in classes for the emotionally handicapped reported that they were surprised at the infor-

mation given to them by the school regarding their children, and had an average or low degree of trust in the testing results and the recommended programs.

IV. MCPS In General

A. Low Tolerance and Human Relations

There appears to have developed in the Montgomery County School system, an undesignated but ever present achievement norm into which all children throughout the county are expected to fit. This norm has been set up as a result of the image of the standard population known to inhabit the Bethesda - Chevy Chase areas of the county. This unfortunate insult to individual differences has resulted in a low tolerance on the part of school personnel for the students (especially minority students) who find themselves outside of the norm (in skills, exposure, background, etc.). This particular factor becomes evident in the types of educational approaches taken towards students who are unable to grasp the study tactics necessary to make it in the system as it is. In many instances the intellectual functioning and ability of these students could probably be greatly improved if they were first simply taught how to take a test or if they were taught achievement motivation strategies and other methods for developing their potential.

Outstanding among the problems confronting many teachers who initiate referrals to special education programs are (1) children whose motivational skills need strengthening, (2) children who use agressive behavior to express frustrations they cannot overcome by verbal means, (3) children who do not respond and conform to a competitive classroom atmosphere, (4) children who need small group experiences with more individualized

instruction. None of these situations necessarily indicates retardation or need for special education placement, but rather new approaches to the learning patterns and needs of children, as well as updating the services and training of staff to deal effectively with cultural (behavioral and background) differences of the larger black and other minority populations emerging in MCPS. This does not mean that teachers should expect minority students to accomplish less or to master fewer skills.

The factors just discussed put a greater load on the Human Relations Department. This department has been assigned the task of providing in-service training for MCPS personnel in the area of minority problems and issues. The time set aside for the present type of training being offered is inadequate and with recent budget reductions the development of a more serious problem in relation to special education placements is imminent.

The Human Relations Department now has responsibility for handling adult personnel placement problems in addition to child related racial matters. It is the consultants' observation that the Human Relation Department has a very large responsibility within MCPS and is in danger of becoming overwhelmed and thus less productive.

The courses offered in inservice-training do not reflect specific content on the special needs of the minority students. For instance, there are no courses offered for 1) the socialization of minority children into the school system; or 2)the use of achievement motivation techniques that can be implemented in the schools; or 3) approaches to redefining and redirecting aggressive behavior to more positive channels although referrals to pupil services for these problems are quite extensive.

UNMET NEEDS

A series of unmet needs were identified during the course of the study. The list has been drawn up from findings already discussed throughout the report and will provide a point of reference for our final recommendations of the committee. These needs include:

1. Providing catch-up, resource rooms or D/P programs with small group setting (for those students who find it easier to learn this way) in a systematic way from elementary through high school throughout the county.
2. Providing more skilled psychological consultation as well as evaluation focused on the emotional needs of all children.
3. Implementing a system of psychiatric or mental health consultation system along with family counseling services, including a therapeutic element within the pupil services department.
4. Identification of community services available to aid counselors, psychologists, etc. in referring students and their families for free or low fee services.
5. Redistributing resources, training and staff development throughout the county including the identification of budget resources for better and more equal distribution.
6. Providing specific special education programs in secondary schools comparable to programs provided on the elementary level.
7. Clarifying placement procedures and state laws is one document for everyone's understanding.
8. Providing mandatory courses to MCPS personnel relative to cultural differences and socialization factors, appropriate programming and achievement expectations.

RECOMMENDATIONS

Recommendation #1: Communication

That key Central Administrative staff, with the participation of the Superintendent, meet with all appropriate staff in each area to review the current policy and procedures for special education placement. We further recommend that these meetings take place before the first round of fall area screenings take place.

Recommendation #2: School by School Needs Assessment

That each MCPS school administrator, working with its faculty, be required to develop a comprehensive needs assessment pertaining to the regular instruction of minority and disadvantaged students and a two year sequence of behavioral objectives geared toward a more affirmative instructional program for these students, recognizing that differences in socialization patterns and socio-economic status are influential in deciding an appropriate education program.

Recommendation #3: Pre-referral Procedures

That referral procedures and process be revised to include provisions whereby local school classroom teachers, principals, and pupil personnel workers are accountable on such matters as:

a. utilization of pre-established teaching methods to foster individual differences (i.e. use of special materials, visual motor training, structured environment).

b. automatic adjustment of the curriculum to minority learning styles and socioeconomic conditions before referral.

c. a thorough in-school diagnostic-prescriptive assessment of students strengths and weakness in tool subjects.

d. the maintenance of ancedotal records showing how level 2 (consultation from psychological, physical and academic specialists) was utilized in the classroom.

Recommendation #4: Indentification and Classification Procedures

That the MCPS procedures for identification and classification of students as "mentally retarded," "emotionally handicapped," or "learning disability" including the designation of "types and degrees" be administratively separated from the MCPS procedures for placement and treatment of the particular condition of the student. MCPS should establish definite and local guidelines and criteria for designating a student as MR, EH, or LD, along with a system of checks and balances to assure the validity of the classification which takes place.

Recommendation #5: Staff Development

There is need for a comprehensive staff development program for classroom teachers, administrators, pupil personnel workers, and psychologists, emphasizing:

a. normal educational differences due to race and socioeconomic status.

b. a basic orientation to the role of special education as it promotes the concept of mainstreaming as set forth in the Maryland continuum.

c. a clarification of the services and differences between compensatory education, remedial education, and special education.

d. training for teachers of the mentally retarded in group management, language development, and affective development.

Recommendation #6: Testing Policy and Procedures

a. that MCPS Board of Education adopt a written policy regulating psychological tests and testing procedures with special emphasis on protecting the rights of minority students.

b. that a procedure for supervision of testing be established, including an administrative-professional review of all test reports. In addition, this procedure should require that all diagnoses of "mental retardation," "emotional handicap" and "learning disability" be reviewed by the Director of Testing, prior to making final educational decisions.

c. that trained and certified psychologists (qualified examiners) be required to re-assume their testing role as diagnosticians of MR, EH, and LD for official classification purposes even at the expense of other assumed duties. In addition, MCPS should seriously consider establishing a small cadre of Board Certified clinical psychologists as specialist in the classification of MR, EH, and LD.

d. that special attention be given to the development of a psychological-educational assessment battery which will be prescriptive in impact and not rely on IQ as a descriptor of the child's ability to learn.

Recommendation #7: School Medical Advisors (SMA)

That there be a review and clarification of the role of SMA's in the placement process. We further recommend that:

a. SMA's should be trained pediatricians with a strong background in child development.

b. attendance at In-School and Area Screening should be mandatory of SMA's.

c. SMA's should participate in yearly seminars to up-date knowledge in child development and handicapping conditions in addition to participation in MCPS human relation training program.

d. SMA's should participate in regularly scheduled in-service training conference with teachers, psychologists, and school administrators for exchange of professional knowledge across and between disciplines.

Recommendation #8: Parent Concerns

a. that parent conferences, giving the results of testing and proposed special education placement be held not more than six weeks after the testing has taken place.

b. that no child have to wait longer than six weeks after parental notification, for placement to be effective.

c. that pupil personnel workers and other staff give additional time and service to parents of children placed in the program for the emotionally handicapped, if that program is to be effective.

Recommendation #9: Programs

a. that a critical evaluation of Junior and Senior High School special education programs be conducted, utilizing a rigorous evaluation design, with a view toward correcting the present unsatisfactory situation in regard to pupil progress and development.

b. that a two year reevaluation cycle be established for all "mentally retarded," "emotionally disturbed" and "learning disabled students with a view toward utilizing test re-test data as one evaluation of program effectiveness.

Recommendation #10: Human Relations

a. that the time being given to certain "adult oriented" functions within the Human Relations Department should be reassessed and that a priority be given to increasing the time given to child related problems and to the training of teachers to work with minority differences in the classroom.

b. that a human relations course be developed which will instruct MCPS staff on the socialization of Black children within the dominent MCPS system. Special emphasis should be placed on the Strengths of the Black Family, as published by the National Urban League and others.

Recommendation #11: Public Relations

That MCPS undertake a wide series of information efforts as described in "Action Steps on Minority Relations" (December, 1974), however clearly informing the system, parents, and the public of the differences between "special education," "compensatory education," "remedial education, with special attention to clarifying programs for "exceptional children" from those of normal but disadvantaged and/or minority children.

APPENDIXES

APPENDIXES

1. Interview and observation Procedures

   a. MCPS Interview Questionnaire

2. Observation Schedule, In-School Staffings, Area Screenings

3. Service checklist

4. Parent Survey Form

INTERVIEW AND OBSERVATION PROCEDURES

A. Call Area Assistant Superintendent to arrange a meeting

(1) Area Assistant Superintendent

(2) Area Supervisor of Pupil Services

(3) Area Supervisor of Supplementary Services, together

a. Conduct Interview (see questionnaire)

B. Obtain schedule of area screening meeting and In-School staffings for each school in the area.

(1) Arrange Drop-in permission: to observe screening and placement meetings.

C. Complete Interview and Observations schedule for each meeting and conference.

D. Target Date for completion of observations and interviews 21 February 1975.

MCPS INTERVIEW QUESTIONNAIRE

Instructions: Ask each question. Follow up with probes, when necessary. Keep notes on responses sheet.

1. What are the trends and goals of special education in (MCPS).

   Probe: Programs get better - some get worse: which MCPS special education programs have improved - which need strengthening.

2. Where are minority students found within MCPS special education programs?

   Probe: How do you explain the fact that there are three times the number of minority students in the retardation programs?

3. What are the specific problems in placement of minority students in special education programs?

   Probe: Can you think of any exceptions to this process?

   Probe: Do you know of any case where the process didn't work?

4. How can the present diagnostic/assessment process be fairer to MCPS minority students?

   Probe: Tests and testing?

   Probe: Staff knowledge of problems of minority students?

5. How closely do staff in your area follw the policy and procedures for placement within the continuum concepts?

   Probe: Ask for percentages, and effectiveness rating on following the policy:

   Probe: Where are the points of difficulty in attempting to follow the policy and procedures?

OBSERVATION SCHEDULE
IN-SCHOOL STAFFINGS
AREA SCREENINGS

School_____
Place_____
Date_____

Length of time for one case_____

1. Record who is present. Are all members of the team as defined by the policy, present?
2. Obtain check list of services which have been provided to pupils at Level 1,2,3,4.
3. What types of data are presented to describe student behavior:

Opinions and Judgements	Yes	No
Observational - formal informal	Yes	No
Interview - student parent	Yes	No
Testing	Yes	No

4. What is your judgement about the quality of data presented at the conference?
5. How are decisions made?
6. What is the relation of the discussion to parent issues?
7. Be certain to review student cumulative folders.

SERVICE CHECKLIST

Level 1 - What services did the regular classroom teacher and/or Principal prescribe and carry out: i.e. isolation, send to office, hurdle help, restructuring, rewards, punishments, etc.

Level 2 -

(a) Support and consultation from:

Psychological specialists	Yes	No
Physical specialists	Yes	No
Academic specialists	Yes	No

(b) Inservice training Yes No

Comments:

Level 3 -

Direct assistance from a specialist Yes No

Type____ How much _____

Supplemental Instruction Yes No

Type____ How much _____

Comments:

Level 4 -

Diagnostic/prescriptive Teacher - Daily	Yes	No
Resource Room - Daily	Yes	No

Other:

Has the child been referred to any public or Private external services? Yes No

PARENT SURVEY

Area____

Who is answering the questionnaire?

- ☐ Mother
- ☐ Father
- ☐ Guardian

Child's Age ____

Child's Sex:

- ☐ Boy
- ☐ Girl

Child's Race:

- ☐ Black
- ☐ Native American (Indian)
- ☐ Oriental
- ☐ Spanish
- ☐ White

Child's Program:

- ☐ Special Class for Emotionally Handicapped
- ☐ Special Class for Specific Learning Disabilities
- ☐ Special Class for Mild Retardation
- ☐ Catch-Up Class
- ☐ Special Class for Mild Learning Handicaps
- ☐ I'm not certain of my child's program

QUESTIONNAIRE

Directions: For each question, please put an x in the box beside the answer that seems most correct to you.

1. Who first suggested that your child might be having difficulties in the regular classroom?

   - ☐ His teacher
   - ☐ The principal
   - ☐ The school counselor
   - ☐ We, his parents
   - ☐ Other (Please specify) _____

2. What kind of difficulty was he having? (If there was more than one problem, please mark the most important one)

   - ☐ Behavior
   - ☐ School work
   - ☐ Getting along with classmates
   - ☐ Getting along with the teacher
   - ☐ Other (Please specify) _____

3. Before your child was actually placed in his special education program, there were several things that happened or that you were told about that may or may not have been very clear to you.

   a. How clear was the school in explaining your child's difficulties to you?

   - ☐ The school was very clear.
   - ☐ The school was not completely clear.
   - ☐ The school was not clear at all.
   - ☐ I don't recall.

b. During the psychological testing of your child, how clear was the school in explaining to you what was going on?

- ☐ The school was very clear.
- ☐ The school was not completely clear.
- ☐ The school was not clear at all.
- ☐ I don't recall.

c. After the tests were finished, there was a meeting which you went to. The psychologist told you how your child did on the tests and told you what he thought the tests meant. Was what the psychologist said clear to you?

- ☐ It was very clear.
- ☐ It was not completely clear.
- ☐ It was not clear at all.
- ☐ I don't recall.
- ☐ There was no meeting.

d. Did you feel free to ask the psychologist and others in the meeting all the questions that you wanted to ask?

- ☐ I felt completely free to ask questions.
- ☐ I felt somewhat free to ask questions.
- ☐ I did not feel free to ask questions.
- ☐ I don't recall how I felt.
- ☐ There was no meeting.

4. Before your child started his special education program, you may or may not have expected some of the things that happened or that you were told about.

a. Were you surprised when the school first told you that your child was having difficulty in the regular classroom?

- ☐ I was not surprised.
- ☐ I was somewhat surprised.
- ☐ I was very surprised.
- ☐ I don't recall.

b. Were you surprised at what the psychologist told you about the results of the testing?

- ☐ I was not surprised.
- ☐ I was somewhat surprised.
- ☐ I was very surprised.
- ☐ I don't recall.

c. Were you surprised when special education was suggested to you by the school?

- ☐ I was not surprised.
- ☐ I was somewhat surprised.
- ☐ I was very surprised.
- ☐ I don't recall.

5. You may or may not have agreed with what you were told about your child's difficulties.

   a. Did you agree with what the school first said about your child's having difficulty?

   - ☐ I agreed completely.
   - ☐ I agreed somewhat.
   - ☐ I disagreed.
   - ☐ I don't recall.

   b. Did you agree with what the psychologist said your child's difficulty was?

   - ☐ I agreed completely.
   - ☐ I agreed somewhat.
   - ☐ I disagreed.
   - ☐ I don't recall.

6. You may or may not have felt that you could trust the judgment of the school in doing certain things.

   a. Did you feel that you could trust the judgment of the school when they suggested testing?

   - ☐ I felt that I could completely trust their judgment.
   - ☐ I felt some doubts.
   - ☐ I did not feel that I could trust the school at all.
   - ☐ I'm not sure how I felt.

   b. Did you trust the school to do what was best in recommending a special education program for your child?

   - ☐ I felt that I could completely trust their judgement.
   - ☐ I felt some doubts.
   - ☐ I did not feel that I could trust their judgment.
   - ☐ I'm not sure how I felt.

7. You may or may not have felt that you had much choice in what was done before your child was in special education.

   a. Did you feel that you had any choice about the testing?

   - ☐ I felt that I had a lot of choice.
   - ☐ I felt that I had some choice.
   - ☐ I did not feel that I had any choice at all.
   - ☐ I don't recall.

   b. When the school suggested or recommended a special education program for your child, did you feel that you had any choice?

   - ☐ I felt that I had a lot of choice.
   - ☐ I felt that I had some choice.
   - ☐ I did not feel that I had any choice at all.
   - ☐ I don't recall.

8. At certain times you may or may not have felt that your child was being treated fairly.

   a. Did you feel that the testing was fair?

   - ☐ I felt that it was completely fair.
   - ☐ I felt that it was fair in some ways, unfair in others.
   - ☐ I felt that it was unfair.
   - ☐ I'm not sure how I felt.

   b. Did you feel that, in suggesting special education, the people in the meeting were being fair to your child?

   - ☐ I felt that they were being completely fair.
   - ☐ I felt that they were being fair in some ways, unfair in others.
   - ☐ I felt that they were being unfair.
   - ☐ I'm not sure how I felt.

9. Did you feel that the testing was necessary?

   - ☐ I felt that the testing was very necessary.
   - ☐ I felt that the testing was necessary in some ways.
   - ☐ I felt that the testing was unnecessary.
   - ☐ I'm not sure how I felt.

10. Did you feel that the special education program was appropriate?

   - ☐ I felt that it was very appropriate.
   - ☐ I felt that it might possibly be appropriate.
   - ☐ I felt that it was inappropriate.
   - ☐ I'm not sure how I felt.

11. After the testing of your child began, how long was it before the school met with you to suggest or recommend a program?

   - ☐ Three weeks or less.
   - ☐ Three weeks to three months.
   - ☐ Three months to nine months.
   - ☐ More than nine months.

12. After it was decided to place your child in the special education program, how long did it take before he was actually placed there?

   - ☐ Less than a week.
   - ☐ One week to one month.
   - ☐ One month to four months.
   - ☐ More than four months.

13. How satisfied were you, in general, with the whole process of testing and placing your child in special education?

   - ☐ I was very satisfied.
   - ☐ I was satisfied in some ways, not in others.
   - ☐ I was not satisfied at all.
   - ☐ I'm not sure.

14. Did you feel that the school was responsible for your child's difficulties?

- ☐ I felt that the school was entirely responsible.
- ☐ I felt that the school contributed to the problem.
- ☐ I did not feel that the school was responsible.
- ☐ I'm not sure how I felt.

15. In your opinion, how has your child been doing since being in his special education class?

a. How has his behavior been?

- ☐ Better
- ☐ The same
- ☐ Worse

b. How does he get along with his classmates?

- ☐ Better
- ☐ The same
- ☐ Worse

c. How does he get along with children outside of his class?

- ☐ Better
- ☐ The same
- ☐ Worse

d. How does he get along with adults?

- ☐ Better
- ☐ The same
- ☐ Worse

e. How does he feel about himself?

- ☐ Better
- ☐ The same
- ☐ Worse

f. How is he doing in reading?

- ☐ Better
- ☐ The same
- ☐ Worse

g. How is he doing in arithmetic?

- ☐ Better
- ☐ The same
- ☐ Worse

h. How does he like school?

- ☐ Better
- ☐ The same
- ☐ Worse

i. Is he learning more?

- ☐ More
- ☐ The same
- ☐ Less

16. How do you feel about your child leaving special education and entering a regular program?

- ☐ I feel that it will be easy.
- ☐ I feel that it will be somewhat difficult.
- ☐ I feel that it will be very difficult.

17. How long do you feel your child will be in special education?

- ☐ One semester
- ☐ One or two years
- ☐ Two to five years
- ☐ Indefinitely

18. How do you feel about your child's being in special education now?

- ☐ I'm glad he's there.
- ☐ I have some doubts about his being there.
- ☐ I don't think he belongs in there.
- ☐ I'm not sure.

19. If you have any additional comments that you think would be helpful, please write them here.

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